								. 1	Application or Docket Number				
,	PATENT APPLICATION FEE DETERMINATION RECORD												
Effective October 1, 2003									10/773,817				
CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
			1)	(Column 2)			TYPE		OR SMALL ENTITY		ENTITY		
TOTAL CLAIMS								RATE	FEE		RATE	FEE	
FOR .			NUMBER FILED		NUMBER EXTRA			BASIC FEI	385.00	OR	Basic Fee	770.00	
TOTAL CHARGEABLE CLAIMS			minus 20=		. 10			XS 9=		OR	X\$18=		
INDEPENDENT CLAIMS			4 minus 3 =		٠/	, /		X43=		OR	X86=	86	
ML	JLTIPLE DEPEN	NDENT CLAIM P	RESENT					+145=		OR	+290=		
• 11	the difference	in column 1 is	less than ze	ero, enter "0" in column 2			L	TOTAL]	TOTAL	6.5	
								TOTAL	<u> </u>	OR	•	856	
_	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							Small	ENTITY	OR	OTHER SMALL		
A		CLAIMS REMAINING		HIGH	EST	PRESENT	l		ADDI-		•	ADDI-	
AMENDMENT		AFTER AMENDMENT		PREVIO	USLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	. 19	Minus		0	=	1	X\$ 9=		OR	X\$18=		
ME	Independent	. 4	Minus	****	(╽┟	X43=		OR	X86=		
٨	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									Ų,			
1,9,10,19							L	+145=		OR	+290=		
	1.0							TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE		
	10-3-3	(Column 3)											
AMENDMENT B	•	CLAIMS REMAINING		HIGH	BER	PRESENT		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
		AFTER AMENDMENT		PREVIO PAID I		EXTRA	H		FEE			FEE	
	Total	19,	Minus	- 2	<u>Q</u>	•		X\$ 9=		OR	X\$18=		
AME	Independent	NTATION OF MU	Minus	ENDENT	CLAIM	<u> -</u>		X43=		OR	X86=		
	rinoi rneoe	MATERIAL OF MIC	CHELE DEF	CHOCIAL			۱۲	+145=		OR	+290=	·	
								TOTAL		OR	TOTAL		
(Column 1) (Column 2) (Column 3)								DOIT FEE		/	ADDIT. FEE		
,,]	CLAIMS · HIGHEST								ADDI-	ſ		ADDI-	
AMENDMENT C		REMAINING AFTER		PREVIO	USLY	PRESENT EXTRA		RATE	TIONAL	İ	RATE	TIONAL	
	T-1-1	AMENDMENT	1410	PAID F	OR		-		FEE	ŀ		FEE	
	Total	• 16.	Minus Minus	* 2		=	L	XS 9=		OR	X\$18=	0	
AM	Independent • 7 Minus ••• 4			CI AIL	7	.	X43=	•	OR	X86=	0		
لــا	ringi rhese	HANDA OF MU		CHUENI	CO-UNIT		' [.	+145=		OR	+290=	Ø	
		nn 1 is less than th mber Previously Pai					_ L	TOTAL		UB 1	TOTAL	0	
	f the "Highest Nu	mber Previously Pa	id For IN THIS	S SPACE IS	less tha	n 3, enter "3."	~	OIT. FEE		, ,	ODIT. FEEL	- -	
	பையின் வலய	iber Previously Paid	rear (location	ingepende	in') o≱ <u>n</u> iq	mgress number	r IOUTIC	an na eddb	husta ook	an COM.	μι ση τ. 	•	